DIVISION OF SERVICES FOR PEOPLE WITH DISABILITIES

SAMPLE PERSON-CENTERED PLAN – ACTION PLAN

Name: _____   **Date:** _____

Goal/Outcome[1] or **Stand-Alone**[2] support: _____
_____

Current Status of the **Goal/Outcome**: _____
_____
_____

Identify supports and services:

1)

Who:	Dates - Start:
Formal Strategy[3]: *yes / no* Monthly Summary[4]: *yes / no*	End:

2)

Who:	Dates - Start:
Formal Strategy: *yes / no* Monthly Summary: *yes / no*	End:

3)

Who:	Dates - Start:
Formal Strategy: *yes / no* Monthly Summary: *yes / no*	End:

4)

Who:	Dates - Start:
Formal Strategy: *yes / no* Monthly Summary: *yes / no*	End:

DEFINITIONS ARE LISTED ON PAGE 2 OF THIS FORM

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Descriptions from Division policy of responsibilities and terms related to the use of Sample Form S1-16 AP

Providers develop, monitor and implement supports for which they are responsible as agreed upon and listed in the **Person**-**Centered Plan**.

Providers and **Support Coordinators** develop, monitor and implement natural supports for which they are responsible for as agreed upon and listed in the Person-Centered Plan.

[1] **Goals/Outcomes** are the desired results of actions and supports. Goals/Outcomes are defined by the Person. Goals/Outcomes are based upon the ideas, hopes and dreams Persons have concerning how they want to live. Goals/Outcomes relate to the values, preferences and choices Persons make about with whom to associate and what to select as personal priorities in life.

[2] **Stand-Alone Supports** are objectives that the team or a physician with or without the support of the person believe necessary to maintain a person's health and safety. Stand-alone supports may not be related to or necessary for the accomplishment of an outcome selected by the Person.

[3]**Formal (Support) Strategies** are written by the **Provider** and shall include details on the supports that will be provided to help the Person reach personal outcomes. Support Strategies may include services, programs, relationships, mentoring and training believed necessary or beneficial to the accomplishment or maintenance of an outcome. Supports must be listed and defined or outlined in the plan but may be developed more specifically in separate documents, (e.g., action plan, behavioral plan, staff instruction sheet, data collection and/or task analysis sheet). Providers are expected to use **Natural Supports** whenever applicable or make a plan to develop them if not available. Support strategies should describe how the support is to be designed, delivered and documented.

[4]**Monthly Summary** is the documentation review and evaluation of the implementation and results of a specific **Support Strategy**. The person or **Provider** who is assigned the **Support Strategy** in the **Action Plan** completes the **Monthly Summary** and turns it into the **Support Coordinator** on a monthly basis—*no later than the 15th of the month.*